

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

National Association of Mutual Insurance Companies PAC

ADDRESS (number and street) ▼

3601 Vincennes Road

PO Box 68700

☐ Check if different than previously reported. (ACC)

Indianapolis

IN

46268

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00170258

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
11 27 2012

through

M M M / D D D / Y Y Y Y Y Y
12 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Gregg A. Dykstra J.D.

Signature of Treasurer

Mr. Gregg A. Dykstra J.D.

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 30 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 27 / 2012 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		98749.50
(b) Cash on Hand at Beginning of Reporting Period.....	16979.33	
(c) Total Receipts (from Line 19)	14898.24	395767.22
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	31877.57	494516.72
7. Total Disbursements (from Line 31)	16147.53	478786.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	15730.04	15730.04
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

Report Covering the Period:

From:

11

27

2012

To:

12

31

2012

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

8220.34

259220.33

(ii) Unitemized

1674.38

90261.32

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

9894.72

349481.65

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

5000.00

43750.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

14894.72

393231.65

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

2429.14

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

3.52

106.43

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

14898.24

395767.22

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

14898.24

395767.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	147.53	2474.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	147.53	2474.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	422000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2412.43
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2412.43
29. Other Disbursements	11000.00	51900.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16147.53	478786.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16147.53	478786.68

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	14894.72	393231.65
34. Total Contribution Refunds (from Line 28(d))	0.00	2412.43
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14894.72	390819.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	147.53	2474.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	2429.14
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	147.53	45.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 75

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Cathy M. Adcock

Mailing Address PO Box 30660

City
Lansing

State
MI

Zip Code
48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AC9273D0EFD424E47A8C

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Todd E. Albert

Mailing Address PO Box 111

City
Bucyrus

State
OH

Zip Code
44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.25

Date of Receipt

11 / 27 / 2012

Transaction ID : A02255423093D47DA972

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Mr. Todd E. Albert

Mailing Address PO Box 111

City
Bucyrus

State
OH

Zip Code
44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

721.25

Date of Receipt

12 / 05 / 2012

Transaction ID : A0856FBD870184A23ACF

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 75
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Todd E. Albert

Mailing Address PO Box 111

City State Zip Code
 Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Ohio Mutual Insurance Company

Occupation
 Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 17 2012

Transaction ID : A804A34C2B6624F48A15

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Mr. Thomas Alighieri

Mailing Address 222 Ames St

City State Zip Code
 Dedham MA 02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Norfolk & Dedham Mutual Fire Insurance

Occupation
 Assistant Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 29 2012

Transaction ID : A6EBEC98C8E794567AE3

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Mr. Thomas Alighieri

Mailing Address 222 Ames St

City State Zip Code
 Dedham MA 02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Norfolk & Dedham Mutual Fire Insurance

Occupation
 Assistant Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 12 2012

Transaction ID : A94D9DD32A717409F873

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Thomas Alighieri

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

Assistant Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 26 / 2012

Transaction ID : A58CBAB3B14294FD6993

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mr. Neil Aldredge

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Senior Vice President - State and Poli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : A20B5D5EBBCF1471B844

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Mr. Neil Aldredge

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Senior Vice President - State and Poli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 17 / 2012

Transaction ID : A4B32DFE20F804450978

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 75

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Diane Allen

Mailing Address 6101 Anacapri Blvd

City

Lansing

State

MI

Zip Code

48917-3994

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Vice President-Personnel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : A6CAD088338944892976

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

B. Mr. Rick A. Arens

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : AB6BBAAA3A2A04CB19C4

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Ms. Laura Grace Ashton

Mailing Address 122 C St NW Ste 540

City

Washington

State

DC

Zip Code

20001-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

PAC Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2012

Transaction ID : A8292605760964F7A965

Amount of Each Receipt this Period

11.00

SUBTOTAL of Receipts This Page (optional)..... ►

91.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Laura Grace Ashton

Mailing Address 122 C St NW Ste 540

City

Washington

State

DC

Zip Code

20001-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

PAC Manager

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 17 / 2012

Transaction ID : A924D7F7F0A2547869B9

Amount of Each Receipt this Period

11.00

Full Name (Last, First, Middle Initial)

B. Ms. Lisa M Ayotte

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

AVP- Real Estate & Operational Service

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 05 / 2012

Transaction ID : A7E113B197F6948CA8B8

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Mr. Brent Bahler

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Vice President, Public Affairs

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 21 / 2012

Transaction ID : A94FC4493730F4418B9C

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

291.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 75
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Michael D. Baker

Mailing Address PO Box 30660

City	State	Zip Code
Lansing	MI	48909-8160

FEC ID number of contributing federal political committee.

C

Name of Employer
Auto-Owners Insurance Company

Occupation
Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AE64B531B0FD94805B38

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Kevin Barnes

Mailing Address PO Box 30660

City	State	Zip Code
Lansing	MI	48909-8160

FEC ID number of contributing federal political committee.

C

Name of Employer
Auto-Owners Insurance Company

Occupation
Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A1F4EED23E28F4F01BF3

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Mr. John S. Benson

Mailing Address One Mutual Avenue

City	State	Zip Code
Frankenmuth	MI	48787-0001

FEC ID number of contributing federal political committee.

C

Name of Employer
Frankenmuth Mutual Insurance Company

Occupation
President, CEO & Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.75

Date of Receipt

12 / 07 / 2012

Transaction ID : A3AFB023B135A495F9C8

Amount of Each Receipt this Period

115.39

SUBTOTAL of Receipts This Page (optional)..... ►

190.39

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 75

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. John S. Benson

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

President, CEO & Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.14

Date of Receipt

12 / 21 / 2012

Transaction ID : ABB950200A5F64D3DB49

Amount of Each Receipt this Period

115.39

Full Name (Last, First, Middle Initial)

B. Ms. Rena Bilodeau

Mailing Address 1460 Wells St

City

Enumclaw

State

WA

Zip Code

98022-3003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mutual of Enumclaw Insurance Company

Occupation

Vice President - Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1325.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A2A7F1F43D90043E4B6F

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Ms. Heather Brown

Mailing Address PO Box 111

City

Bucyrus

State

OH

Zip Code

44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Bill Service Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

11 / 27 / 2012

Transaction ID : AC9AC3125455646E0B8D

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.39

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Heather Brown

Mailing Address PO Box 111

City

Bucyrus

State

OH

Zip Code

44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Bill Service Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AC7EB8723112E4F50B9F

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Ms. Heather Brown

Mailing Address PO Box 111

City

Bucyrus

State

OH

Zip Code

44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Bill Service Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

12 / 17 / 2012

Transaction ID : A634B42D6BCCD4E3DB63

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

C. Ms. Tina Brumley

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AC9E8BF2AD07B4C7B8C8

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Bob I. Buchanan

Mailing Address 6101 Anacapi Blvd

City

Lansing

State

MI

Zip Code

48917-3994

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Senior Vice President, Info. Systems &

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

12 / 05 / 2012

Transaction ID : ADD9FD299849D494FB6E

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Mr. Stephen Buell

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A7137D88EC1E342C5916

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Virginia Caro

Mailing Address 3030 N. 3rd Street

City

Phoenix

State

AZ

Zip Code

85012-3074

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCF Arizona

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.62

Date of Receipt

12 / 17 / 2012

Transaction ID : AFE277E12F7DD400DA51

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Virginia Caro

Mailing Address 3030 N. 3rd Street

City

Phoenix

State

AZ

Zip Code

85012-3074

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCF Arizona

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

333.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 27 / 2012

Transaction ID : A408130D7936842429B4

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

B. Mr. Charles M. Chamness

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

President & CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2012

Transaction ID : AD0FD5B6893E74E52865

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

c. Mr. Charles M. Chamness

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

President & CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : A2FF61E1C483C4E6E9BE

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)..... ►

221.66

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Mark Coe

Mailing Address PO Box 111

City State Zip Code
 Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Ohio Mutual Insurance Company

Occupation
 IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

894.00

Date of Receipt

11 / 27 / 2012

Transaction ID : A26DF1DB014784AD49A7

Amount of Each Receipt this Period

39.00

Full Name (Last, First, Middle Initial)

B. Mr. Mark Coe

Mailing Address PO Box 111

City State Zip Code
 Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Ohio Mutual Insurance Company

Occupation
 IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

933.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A1694CA063EED4DB9937

Amount of Each Receipt this Period

39.00

Full Name (Last, First, Middle Initial)

C. Mr. Mark Coe

Mailing Address PO Box 111

City State Zip Code
 Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Ohio Mutual Insurance Company

Occupation
 IT Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

972.00

Date of Receipt

12 / 17 / 2012

Transaction ID : AB8F33B2EEAD3454995D

Amount of Each Receipt this Period

39.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

117.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Darwin G. Copeman CPCU

Mailing Address PO Box 468

City

Neenah

State

WI

Zip Code

54957-0468

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jewelers Mutual Insurance Company

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2648.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 06 / 2012

Transaction ID : AE24455D6059F4D479B2

Amount of Each Receipt this Period

231.00

Full Name (Last, First, Middle Initial)

B. Paul Davis

Mailing Address PO Box 6927

City

Richmond

State

VA

Zip Code

23230-0927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mutual Assurance Society of Virginia

Occupation

Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 04 / 2012

Transaction ID : A96C77E707BF34BC1830

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

C. Mr. Anthony O. Dean

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : AFBFCF3DE02BA4737AF7

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

279.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Rick DeGraw

Mailing Address 3030 N 3rd St

City

Phoenix

State

AZ

Zip Code

85012-3074

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCF Arizona

Occupation

COO & Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 17 / 2012

Transaction ID : A3FA57C45E33D40609DA

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

B. Mr. Rick DeGraw

Mailing Address 3030 N 3rd St

City

Phoenix

State

AZ

Zip Code

85012-3074

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCF Arizona

Occupation

COO & Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2012

Transaction ID : A897F8B085F6C4D01866

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

c. Ms. Cynthia Delong

Mailing Address PO Box 1776

City

Yarmouth

State

ME

Zip Code

04096-1776

FEC ID number of contributing
federal political committee.

C

Name of Employer

Patriot Insurance Company

Occupation

Vice President, Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 07 / 2012

Transaction ID : AB55BA764FBC54F85B4C

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

93.34

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Cynthia Delong

Mailing Address PO Box 1776

City
Yarmouth

State
ME

Zip Code
04096-1776

FEC ID number of contributing
federal political committee.

C

Name of Employer

Patriot Insurance Company

Occupation

Vice President, Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 21 / 2012

Transaction ID : AEC80889BFD594AA7812

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Robert Detlefsen PhD

Mailing Address PO Box 68700

City
Indianapolis

State
IN

Zip Code
46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Vice President - Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.08

Date of Receipt

11 / 30 / 2012

Transaction ID : A01D5DD63EE584F03816

Amount of Each Receipt this Period

43.48

Full Name (Last, First, Middle Initial)

c. Mr. Robert Detlefsen PhD

Mailing Address PO Box 68700

City
Indianapolis

State
IN

Zip Code
46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Vice President - Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

956.56

Date of Receipt

12 / 17 / 2012

Transaction ID : AD5043C4E18F44045BEF

Amount of Each Receipt this Period

43.48

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Charles W. Drier

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AD7968053CEC14555878

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Mr. Gregg A. Dykstra J.D.

Mailing Address 3601 Vincennes Rd

City

Indianapolis

State

IN

Zip Code

46268-1154

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2382.84

Date of Receipt

11 / 30 / 2012

Transaction ID : A4B18CB6A13574415AB5

Amount of Each Receipt this Period

96.16

Full Name (Last, First, Middle Initial)

c. Mr. Gregg A. Dykstra J.D.

Mailing Address 3601 Vincennes Rd

City

Indianapolis

State

IN

Zip Code

46268-1154

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2479.00

Date of Receipt

12 / 17 / 2012

Transaction ID : A65830E7CA349422F9D3

Amount of Each Receipt this Period

96.16

SUBTOTAL of Receipts This Page (optional)..... ►

267.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Fred A. Edmond CPCU, CIC

Mailing Address One Mutual Avenue

City State Zip Code
Frankenmuth MI 48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frankenmuth Mutual Insurance Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.75

Date of Receipt

M M / D D / Y Y Y Y Y
12 07 2012

Transaction ID : AE541CB51CFF34E93B37

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

B. Mr. Fred A. Edmond CPCU, CIC

Mailing Address One Mutual Avenue

City State Zip Code
Frankenmuth MI 48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frankenmuth Mutual Insurance Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.22

Date of Receipt

M M / D D / Y Y Y Y Y
12 21 2012

Transaction ID : A8146547CB0AD4E4E99D

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

C. Mr. Andrew M. Eriksen

Mailing Address PO Box 30660

City State Zip Code
Lansing MI 48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Auto-Owners Insurance Company

Occupation
Manager-Project Research & Coordination

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 05 2012

Transaction ID : A164508AE6CFF47BFB46

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

176.94

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Michael L. Faron CPCU

Mailing Address 222 Ames St

City State Zip Code
Dedham MA 02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer
Norfolk & Dedham Mutual Fire Insurance

Occupation
NE Commercial Business Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 29 / 2012

Transaction ID : A3BFF7A0848BB41CBBDF

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael L. Faron CPCU

Mailing Address 222 Ames St

City State Zip Code
Dedham MA 02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer
Norfolk & Dedham Mutual Fire Insurance

Occupation
NE Commercial Business Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 12 / 2012

Transaction ID : AEDBF97BA37F24F1F978

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

c. Mr. Michael L. Faron CPCU

Mailing Address 222 Ames St

City State Zip Code
Dedham MA 02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer
Norfolk & Dedham Mutual Fire Insurance

Occupation
NE Commercial Business Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 26 / 2012

Transaction ID : A44724723574A48119B0

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Clarence Finleyson

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Vice President, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 07 / 2012

Transaction ID : AA02031E58AE3444EA30

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Clarence Finleyson

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Vice President, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 21 / 2012

Transaction ID : AEC90E0916099406B908

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

c. Ms. Gayle Fisher

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President-Life Operatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A9DBC11DCD5644EFB39

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Vincent Franz

Mailing Address 1 Insurance Sq

City State Zip Code
 Celina OH 45822-1659

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Mutual Insurance Company

Occupation
Vice President, Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 07 2012

Transaction ID : AAEBB60CB74DD4950AC

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Vincent Franz

Mailing Address 1 Insurance Sq

City State Zip Code
 Celina OH 45822-1659

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Mutual Insurance Company

Occupation
Vice President, Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 21 2012

Transaction ID : A8F4FB2D822C64002AF5

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Mr. Thomas Froman

Mailing Address PO Box 30660

City State Zip Code
 Lansing MI 48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Auto-Owners Insurance Company

Occupation
Assistant Vice President-Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 05 2012

Transaction ID : A30CB7A0F894A4500932

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. A Benjamin Galloway

Mailing Address PO Box 618

City
Columbia

State
MO

Zip Code
65205-0618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbia Mutual Insurance Company

Occupation

Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

12 / 17 / 2012

Transaction ID : A8CFA2506E91440D5A54

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mr. Matt Gannon

Mailing Address 122 C St NW Ste 540

City
Washington

State
DC

Zip Code
20001-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Assistant Vice President Federal Affai

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 30 / 2012

Transaction ID : A1762D5D4EEAF4284AF2

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Mr. Matt Gannon

Mailing Address 122 C St NW Ste 540

City
Washington

State
DC

Zip Code
20001-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Assistant Vice President Federal Affai

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 17 / 2012

Transaction ID : AA5AA123498C14FD69B6

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Bryan Gilleland

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Vice President, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.75

Date of Receipt

12 / 07 / 2012

Transaction ID : AEF71ADD875584592B27

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

B. Mr. Bryan Gilleland

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Vice President, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.22

Date of Receipt

12 / 21 / 2012

Transaction ID : A8A7BBECE58EB34029B0

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

C. Mr. Jimi Grande

Mailing Address 122 C St NW Ste 540

City

Washington

State

DC

Zip Code

20001-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Senior Vice President-Federal and Poli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2374.05

Date of Receipt

11 / 30 / 2012

Transaction ID : A2F89E22957134C44911

Amount of Each Receipt this Period

113.05

SUBTOTAL of Receipts This Page (optional)..... ►

189.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Alice Hamm

Mailing Address PO Box 30660

City
Lansing

State
MI

Zip Code
48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A20C3B39B0FED417EA00

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Mr. Fred A. Hannula

Mailing Address PO Box 30660

City
Lansing

State
MI

Zip Code
48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Vice President - Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AC8959E3FA0904514A92

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Mr. Christopher D. Hartrich

Mailing Address PO Box 468

City
Neenah

State
WI

Zip Code
54957-0468

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jewelers Mutual Insurance Company

Occupation

Vice President HR/Organizational Devel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

12 / 06 / 2012

Transaction ID : A4775C2BB0F564CD098B

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Joseph B. Haswell

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

Assistant Division Manager, Casualty C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 29 / 2012

Transaction ID : A0CFD9727A8464728BDA

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Joseph B. Haswell

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

Assistant Division Manager, Casualty C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 12 / 2012

Transaction ID : A0C9BDF6370F24ED2986

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

c. Mr. Joseph B. Haswell

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

Assistant Division Manager, Casualty C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 26 / 2012

Transaction ID : A8A7872ACCBEE43C2B1F

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 29 / 2012

Transaction ID : ABB16ECEFB4214BE396E

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mr. F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

12 / 12 / 2012

Transaction ID : A5820671482C142A49C4

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Mr. F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

12 / 26 / 2012

Transaction ID : A9061F7C85F034CBAB2A

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Brenda G. Hennenfent

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AB73573B2E10B4439868

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. Mr. David F. Honold

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.25

Date of Receipt

12 / 07 / 2012

Transaction ID : AA18B9F47E397433BD2

Amount of Each Receipt this Period

76.93

Full Name (Last, First, Middle Initial)

C. Mr. David F. Honold

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.18

Date of Receipt

12 / 21 / 2012

Transaction ID : A6168182DFC944515A38

Amount of Each Receipt this Period

76.93

SUBTOTAL of Receipts This Page (optional)..... ►

174.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Timothy R. Hyle CPA

Mailing Address 1 Preferred Way

City State Zip Code
New Berlin NY 13411-1896

FEC ID number of contributing
federal political committee.

C

Name of Employer
Preferred Mutual Insurance Company

Occupation
Director of Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : A0E48DD4BECCA485FAF6

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Ms. Theresa Jakubick

Mailing Address PO Box 111

City State Zip Code
Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ohio Mutual Insurance Company

Occupation
Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 27 / 2012

Transaction ID : A402A1B1425E4440D990

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Ms. Theresa Jakubick

Mailing Address PO Box 111

City State Zip Code
Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ohio Mutual Insurance Company

Occupation
Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : A85CC7320093D4BEAA5B

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Theresa Jakubick

Mailing Address PO Box 111

City State Zip Code
 Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Ohio Mutual Insurance Company

Occupation
 Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 17 2012

Transaction ID : AA1A4DCB849184C8D83C

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mr. Gary Johnson

Mailing Address PO Box 111

City State Zip Code
 Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Ohio Mutual Insurance Company

Occupation
 Assistant Vice President, Business Ins

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 27 2012

Transaction ID : A4257BCEC17D14573845

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Mr. Gary Johnson

Mailing Address PO Box 111

City State Zip Code
 Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Ohio Mutual Insurance Company

Occupation
 Assistant Vice President, Business Ins

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 05 2012

Transaction ID : A4E05CBDD163849188D9

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Gary Johnson

Mailing Address PO Box 111

City State Zip Code
 Bucyrus OH 44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Ohio Mutual Insurance Company

Occupation
 Assistant Vice President, Business Ins

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 17 2012

Transaction ID : A9229A439901C4AD6A24

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Rick Jones

Mailing Address 3030 N 3rd St

City State Zip Code
 Phoenix AZ 85012-3074

FEC ID number of contributing
federal political committee.

C

Name of Employer
 SCF Arizona

Occupation
 EVP - Chief Sales & Business Developme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 17 2012

Transaction ID : AB0B5489A559A44B98CE

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

C. Mr. Rick Jones

Mailing Address 3030 N 3rd St

City State Zip Code
 Phoenix AZ 85012-3074

FEC ID number of contributing
federal political committee.

C

Name of Employer
 SCF Arizona

Occupation
 EVP - Chief Sales & Business Developme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 27 2012

Transaction ID : A021687554AA9480FB8A

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jon Jorgensen

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : AF60B1461696F42B7B3B

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Ms. Pamela J. Keeney

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAMIC Insurance Company, Inc.

Occupation

Vice President - Underwriting & Ins Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2012

Transaction ID : AF48C0010C603492C8BA

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Ms. Pamela J. Keeney

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAMIC Insurance Company, Inc.

Occupation

Vice President - Underwriting & Ins Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : A5F4609E6A33E4B33BD2

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Mark King

Mailing Address 200 N Main St

City
Bel Air

State Zip Code
MD 21014-3554

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harford Mutual Insurance Company

Occupation
Vice President & Chief Financial Offic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.97

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2012

Transaction ID : AA98543CFDA6A418E805

Amount of Each Receipt this Period

53.33

Full Name (Last, First, Middle Initial)

B. Mr. Drew A. Klasing

Mailing Address PO Box 30660

City
Lansing

State Zip Code
MI 48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Auto-Owners Insurance Company

Occupation
Manager, Home Office Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : AA17AC3F1AEE943D59D5

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

c. Mr. Kraig T. Klopfenstein

Mailing Address PO Box 30660

City
Lansing

State Zip Code
MI 48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Auto-Owners Insurance Company

Occupation
Sales/Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : A5215FD53725D44928A9

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

168.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Justin L. Lear PFMM

Mailing Address PO Box 396

City State Zip Code
 Ellinwood KS 67526-0396

FEC ID number of contributing federal political committee.

C

Name of Employer
 Farmers Mutual Insurance Company

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.97

Date of Receipt

M M / D D / Y Y Y Y Y
 12 21 2012

Transaction ID : A31D524753D9748B1A64

Amount of Each Receipt this Period

33.33

Full Name (Last, First, Middle Initial)

B. Ms. Theresa Lewis

Mailing Address PO Box 6927

City State Zip Code
 Richmond VA 23230-0927

FEC ID number of contributing federal political committee.

C

Name of Employer
 Mutual Assurance Society of Virginia

Occupation
 Assistant Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 04 2012

Transaction ID : ADC2E312752054CD7AA1

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

C. Mr. Steven D. Linkous

Mailing Address 200 N Main St

City State Zip Code
 Bel Air MD 21014-3544

FEC ID number of contributing federal political committee.

C

Name of Employer
 Harford Mutual Insurance Company

Occupation
 President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 21 2012

Transaction ID : AC542DEA8A2F842B1990

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

311.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jeffrey Lopata

Mailing Address 1 Preferred Way

City State Zip Code
 New Berlin NY 13411-1896

FEC ID number of contributing
federal political committee.

C

Name of Employer

Preferred Mutual Insurance Company

Occupation

Manager - Commercial Lines E-Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 05 2012

Transaction ID : AB604B051897242D48B6

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Mr. Mike H. Lovelady

Mailing Address PO Box 30660

City State Zip Code
 Lansing MI 48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 05 2012

Transaction ID : A2E3330E5317B4B119BD

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Ms. Caitlin Lucchino

Mailing Address 122 C St NW Ste 540

City State Zip Code
 Washington DC 20001-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Federal Affairs Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 30 2012

Transaction ID : AFFB926D59033434C913

Amount of Each Receipt this Period

11.00

SUBTOTAL of Receipts This Page (optional)..... ►

71.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Caitlin Lucchino

Mailing Address 122 C St NW Ste 540

City

Washington

State

DC

Zip Code

20001-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Federal Affairs Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.00

Date of Receipt

12 / 17 / 2012

Transaction ID : AE723DD0F20E2472CB32

Amount of Each Receipt this Period

11.00

Full Name (Last, First, Middle Initial)

B. Mr. Tim Lynch

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A1B612ED01D5B4967BD2

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. Ms. Rae Malesh

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Assistant to the President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

11 / 30 / 2012

Transaction ID : A4A7FE79A65E74ABA986

Amount of Each Receipt this Period

13.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.50

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Rae Malesh

Mailing Address PO Box 68700

City
Indianapolis

State Zip Code
IN 46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Association of Mutual Insuran

Occupation
Assistant to the President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 17 / 2012

Transaction ID : A8884C52BF65D4FF79D4

Amount of Each Receipt this Period

13.50

Full Name (Last, First, Middle Initial)

B. Ms. Diane Marshall

Mailing Address PO Box 30660

City
Lansing

State Zip Code
MI 48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Auto-Owners Insurance Company

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : AC161D6B29799470599E

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Mr. Joel Matthies

Mailing Address PO Box 468

City
Neenah

State Zip Code
WI 54957-0468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jewelers Mutual Insurance Company

Occupation
Vice President - Information Technolog

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 06 / 2012

Transaction ID : AD1874158B4804715841

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

158.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Phil McCain

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Vice President, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.75

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 07 / 2012

Transaction ID : A820CA7E4F9144A64B77

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

B. Mr. Phil McCain

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Vice President, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.22

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2012

Transaction ID : ABDDF268DB5884657B39

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

c. S.H. McCullough

Mailing Address PO Box 244017

City

Montgomery

State

AL

Zip Code

36124-4017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

RVP - Montgomery Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : A305765833E7F43378C7

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

96.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Sherry L. McKenzie AAM, AIS

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

12 / 05 / 2012

Transaction ID : ACFB974D8EEB74DF99BE

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Brian S. McLeod

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Vice President, Secretary & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.75

Date of Receipt

12 / 07 / 2012

Transaction ID : A16213011E0994D9084D

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

C. Mr. Brian S. McLeod

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Vice President, Secretary & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.22

Date of Receipt

12 / 21 / 2012

Transaction ID : AA3137263C11B45239FB

Amount of Each Receipt this Period

38.47

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Scott A. Michael

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

AVP - Personal Lines Auto

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 05 / 2012

Transaction ID : AEADC9294BB954A88A0C

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Mr. David Middleton

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Vice President - Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2012

Transaction ID : A4BE645209C39471DBFC

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Mr. David Middleton

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Vice President - Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : AC2524ECA5DFA45BCAF2

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Dona L. Mohr

Mailing Address 1725 Hopley Ave

City State Zip Code
 Bucyrus OH 44820-3569

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Assistant Vice President-Quality Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

11 / 27 / 2012

Transaction ID : AF88D359727324FFC936

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Ms. Dona L. Mohr

Mailing Address 1725 Hopley Ave

City State Zip Code
 Bucyrus OH 44820-3569

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Assistant Vice President-Quality Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AD4E0DE55F3564AFE942

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Ms. Dona L. Mohr

Mailing Address 1725 Hopley Ave

City State Zip Code
 Bucyrus OH 44820-3569

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Assistant Vice President-Quality Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.00

Date of Receipt

12 / 17 / 2012

Transaction ID : AE83F3B144FFF49B2B54

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Carolyn B. Muller

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

AVP-Regional Sales Operations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A9B563D766230482088F

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Mr. Joel P. Murray

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

Vice President, Personal Lines & Marke

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 29 / 2012

Transaction ID : AD60A260E0BD54A06993

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Mr. Joel P. Murray

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

Vice President, Personal Lines & Marke

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 12 / 2012

Transaction ID : AF179FE866A4E4E2582B

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Joel P. Murray

Mailing Address 222 Ames St

City

Dedham

State

MA

Zip Code

02026-1850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

Vice President, Personal Lines & Marke

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 26 / 2012

Transaction ID : AD088E15064224E4B801

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Ms. Karlyn T. Myers

Mailing Address 1 Preferred Way

City

New Berlin

State

NY

Zip Code

13411-1896

FEC ID number of contributing
federal political committee.

C

Name of Employer

Preferred Mutual Insurance Company

Occupation

Vice President, Corporate Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A0EE720B8262E475EAEE

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. Mr. Eric Nelson

Mailing Address 1460 Wells St

City

Enumclaw

State

WA

Zip Code

98022-3003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mutual of Enumclaw Insurance Company

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AA5DD38842497469C9EB

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

340.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. John A. Paul PFMM

Mailing Address PO Box 498

City

Council Bluffs

State

IA

Zip Code

51502-0498

FEC ID number of contributing
federal political committee.

C

Name of Employer

Western Iowa Mutual Insurance Associat

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

12 / 21 / 2012

Transaction ID : AA1E9169AE1574B0AB2E

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Mr. Jeffery Pierce

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President-Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A34A3AFEBEC5D430EAD9

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Ms. Mary S. Pierce

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President-Home Office C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A2DF3B65030074B1FAE8

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

145.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Barry Preslaski

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : A3884E99FC96E4FDBA2

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Mr. Lee Rademacher

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President-Commercial Li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : ABA5B55226FEF4051BD8

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Mr. David Reddick PhD

Mailing Address 3601 Vincennes Rd

City

Indianapolis

State

IN

Zip Code

46268-1154

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Director - Public Policy Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : AF32248101B9447F79E1

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. David Reddick PhD

Mailing Address 3601 Vincennes Rd

City
Indianapolis

State
IN

Zip Code
46268-1154

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Director - Public Policy Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 17 / 2012

Transaction ID : ABEC012CD4D7C4BCA83I

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Ms. Liz Reynolds CPCU, API

Mailing Address PO Box 68700

City
Indianapolis

State
IN

Zip Code
46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

State Affairs Manager/Southeast Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 30 / 2012

Transaction ID : ABD2C57C1F5FC4F09887

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

c. Ms. Liz Reynolds CPCU, API

Mailing Address PO Box 68700

City
Indianapolis

State
IN

Zip Code
46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

State Affairs Manager/Southeast Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 17 / 2012

Transaction ID : AB64D04B105394599BA9

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

40.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jonathan R. Riekse

Mailing Address PO Box 30660

City State Zip Code
 Lansing MI 48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Auto-Owners Insurance Company

Occupation
Senior Vice President, Personal Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 05 2012

Transaction ID : A2959E8AD32E54BBFAFB

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. Mr. L. Gerald Roach CPCU, FLMI

Mailing Address PO Box 6927

City State Zip Code
 Richmond VA 23230-0927

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mutual Assurance Society of Virginia

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3245.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 04 2012

Transaction ID : ABFFC2199E39C4557B00

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Jonathan Rodgers

Mailing Address PO Box 68700

City State Zip Code
 Indianapolis IN 46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Association of Mutual Insuran

Occupation
Staff Accountant II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 30 2012

Transaction ID : A8F01FA706505403FB7C

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

340.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jonathan Rodgers

Mailing Address PO Box 68700

City
Indianapolis

State Zip Code
IN 46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Association of Mutual Insuran

Occupation
Staff Accountant II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 17 / 2012

Transaction ID : AEF2DF4038C9F4072B50

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Ed Roesch

Mailing Address PO Box 68700

City
Indianapolis

State Zip Code
IN 46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAMIC Insurance Company, Inc.

Occupation
Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : A9F531694389E4461A20

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. Mr. Ed Roesch

Mailing Address PO Box 68700

City
Indianapolis

State Zip Code
IN 46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAMIC Insurance Company, Inc.

Occupation
Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 17 / 2012

Transaction ID : A0E018CA8AD294F9DB34

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

30.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Mary Rowlinson

Mailing Address PO Box 111

City

Bucyrus

State

OH

Zip Code

44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

United Ohio Insurance Company

Occupation

Claims Operations Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

11 / 27 / 2012

Transaction ID : A4151A7609EA74D0A949

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Ms. Mary Rowlinson

Mailing Address PO Box 111

City

Bucyrus

State

OH

Zip Code

44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

United Ohio Insurance Company

Occupation

Claims Operations Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A9AE6CF34899445C799F

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Ms. Mary Rowlinson

Mailing Address PO Box 111

City

Bucyrus

State

OH

Zip Code

44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

United Ohio Insurance Company

Occupation

Claims Operations Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

12 / 17 / 2012

Transaction ID : ABBAE19113733480B8F4

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Kenneth Schroeder

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Senior Vice President, Commercial Unde

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 05 / 2012

Transaction ID : A2A52B9BA766E452DB48

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Mr. James C. Schumacher

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Director - Agency Systems

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 05 / 2012

Transaction ID : A9FF43534F8AF4523B1A

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Mr. Kent B. Shantz

Mailing Address PO Box 5626

City

Rockford

State

IL

Zip Code

61125-0626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockford Mutual Insurance Company

Occupation

Vice President of Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

546.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 05 / 2012

Transaction ID : A70A3E262E781418A956

Amount of Each Receipt this Period

117.00

SUBTOTAL of Receipts This Page (optional)..... ►

197.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Gregory Shell

Mailing Address PO Box 30660

City State Zip Code
 Lansing MI 48909-8160

FEC ID number of contributing federal political committee.

C

Name of Employer
 Auto-Owners Insurance Company

Occupation
 Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 05 2012

Transaction ID : A80FF40F14A9044D9B10

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Mr. Donald A. Smith Jr.

Mailing Address 3030 N 3rd St

City State Zip Code
 Phoenix AZ 85012-3074

FEC ID number of contributing federal political committee.

C

Name of Employer
 SCF Arizona

Occupation
 President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 17 2012

Transaction ID : A905C5595F0734BC1B50

Amount of Each Receipt this Period

105.00

Full Name (Last, First, Middle Initial)

C. Mr. Donald A. Smith Jr.

Mailing Address 3030 N 3rd St

City State Zip Code
 Phoenix AZ 85012-3074

FEC ID number of contributing federal political committee.

C

Name of Employer
 SCF Arizona

Occupation
 President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 27 2012

Transaction ID : A9CD8CAEA8DE74A4CAFI

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)..... ►

252.00

TOTAL This Period (last page this line number only)..... ►

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for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Irica Solomon

Mailing Address 122 C St NW Ste 540

City

Washington

State

DC

Zip Code

20001-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Political Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

11 / 30 / 2012

Transaction ID : A8909BCE030C74E02B51

Amount of Each Receipt this Period

43.48

Full Name (Last, First, Middle Initial)

B. Ms. Irica Solomon

Mailing Address 122 C St NW Ste 540

City

Washington

State

DC

Zip Code

20001-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

Political Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1043.56

Date of Receipt

12 / 17 / 2012

Transaction ID : AC1A175BC54D2498D94C

Amount of Each Receipt this Period

43.48

Full Name (Last, First, Middle Initial)

c. Mr. Steven C. Speicher

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Regional Vice President - Forest Regio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A45F580FAF6764153A1B

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

116.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Ms. Kristen Spriggs

Mailing Address PO Box 68700

City
Indianapolis

State
IN

Zip Code
46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Association of Mutual Insuran

Occupation
Vice President - Member Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 30 / 2012

Transaction ID : A8C2DDA8799384D4D97B

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Ms. Kristen Spriggs

Mailing Address PO Box 68700

City
Indianapolis

State
IN

Zip Code
46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Association of Mutual Insuran

Occupation
Vice President - Member Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 17 / 2012

Transaction ID : A9E6BAAD53719484BBC9

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Mr. Robert G. Street AIM

Mailing Address 29 Creighton Ave

City
Foxboro

State
MA

Zip Code
02035-1405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Norfolk & Dedham Mutual Fire Insurance

Occupation
NE Casualty Claims Division Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 29 / 2012

Transaction ID : AFA963CAE91694C73ACD

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Robert G. Street AIM

Mailing Address 29 Creighton Ave

City	State	Zip Code
Foxboro	MA	02035-1405

FEC ID number of contributing federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

NE Casualty Claims Division Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	12	/	2012

Transaction ID : A2D903D9D880042B9A6D

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mr. Robert G. Street AIM

Mailing Address 29 Creighton Ave

City	State	Zip Code
Foxboro	MA	02035-1405

FEC ID number of contributing federal political committee.

C

Name of Employer

Norfolk & Dedham Mutual Fire Insurance

Occupation

NE Casualty Claims Division Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	26	/	2012

Transaction ID : AA8679487CE1D47318AB

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Mr. Edward Stuckrath

Mailing Address 6101 Anacapi Blvd

City	State	Zip Code
Lansing	MI	48917-3994

FEC ID number of contributing federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Regional Vice President - Westminister

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	05	/	2012

Transaction ID : A6015F2539E094C8FA76

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City
Indianapolis

State
IN

Zip Code
46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAMIC Insurance Company, Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

11 / 30 / 2012

Transaction ID : A423896FEEEEF04543834

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Mr. Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City
Indianapolis

State
IN

Zip Code
46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAMIC Insurance Company, Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

12 / 17 / 2012

Transaction ID : AE313FED8E2B14307B7F

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Mr. Jeffrey Tagsold

Mailing Address PO Box 30660

City
Lansing

State
MI

Zip Code
48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A1B80F7847F444E4298F

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Paul Tetrault

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

State Affairs Manager/Northeast Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 30 / 2012

Transaction ID : A813B588EC0BD483DA98

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mr. Paul Tetrault

Mailing Address PO Box 68700

City

Indianapolis

State

IN

Zip Code

46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Association of Mutual Insuran

Occupation

State Affairs Manager/Northeast Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 17 / 2012

Transaction ID : A9E72F8C4CBC84FE8A43

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

c. Mr. Daniel J. Thelen

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Senior Vice President of Human Resourc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A70FD955926264A7C996

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Joe Thesing

Mailing Address PO Box 68700

City
Indianapolis

State Zip Code
IN 46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Association of Mutual Insuran

Occupation
Assistant Vice President - State Affai

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

11 / 30 / 2012

Transaction ID : A6CA5F9832B65462EA94

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Mr. Joe Thesing

Mailing Address PO Box 68700

City
Indianapolis

State Zip Code
IN 46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Association of Mutual Insuran

Occupation
Assistant Vice President - State Affai

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 17 / 2012

Transaction ID : ACAE883C7B708486C959

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Mr. Bruce D. Thomas PFMM

Mailing Address PO Box 594

City
Algona

State Zip Code
IA 50511-0594

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heartland Mutual Insurance Association

Occupation
President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3175.00

Date of Receipt

12 / 07 / 2012

Transaction ID : A5340402540844188A69

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

180.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Randall Trinklein

Mailing Address One Mutual Avenue

City State Zip Code
 Frankenmuth MI 48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Frankenmuth Mutual Insurance Company Vice President of Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 07 2012

Transaction ID : A119C1B25B4C34C1B8AB

Amount of Each Receipt this Period

39.00

Full Name (Last, First, Middle Initial)

B. Mr. Randall Trinklein

Mailing Address One Mutual Avenue

City State Zip Code
 Frankenmuth MI 48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Frankenmuth Mutual Insurance Company Vice President of Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1014.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 21 2012

Transaction ID : A2CC93D5E897347D4BE6

Amount of Each Receipt this Period

39.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael Ulmer

Mailing Address PO Box 68700

City State Zip Code
 Indianapolis IN 46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 National Association of Mutual Insuran Vice President - Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 30 2012

Transaction ID : A8209212EF8AD47F2B0C

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

88.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Michael Ulmer

Mailing Address PO Box 68700

City
Indianapolis

State Zip Code
IN 46268-0700

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Association of Mutual Insuran

Occupation
Vice President - Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 17 / 2012

Transaction ID : A049B8A64A65D478B93D

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Gregg R. U'Ren

Mailing Address PO Box 30660

City
Lansing

State Zip Code
MI 48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer
Auto-Owners Insurance Company

Occupation
Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : A0B442A01A9754EF5BE9

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Mr. Aaron J. Valentine

Mailing Address 1 Preferred Way

City
New Berlin

State Zip Code
NY 13411-1896

FEC ID number of contributing
federal political committee.

C

Name of Employer
Preferred Mutual Insurance Company

Occupation
Senior Vice President, Treasurer & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : A69F657F657984744911

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. James J. Walsh Jr.

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Vice President-Claims

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AD98B95C22E554BE4AEC

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Mr. Joseph Walsh CPCU

Mailing Address PO Box 111

City

Bucyrus

State

OH

Zip Code

44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Manager Farm Lines Underwriter

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 27 / 2012

Transaction ID : A7DD2ACF3493044AA9BC

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

c. Mr. Joseph Walsh CPCU

Mailing Address PO Box 111

City

Bucyrus

State

OH

Zip Code

44820-0111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Manager Farm Lines Underwriter

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A2E9A588C76A740BFABE

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

70.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Joseph Walsh CPCU

Mailing Address PO Box 111

City	State	Zip Code
Bucyrus	OH	44820-0111

FEC ID number of contributing federal political committee.

C

Name of Employer

Ohio Mutual Insurance Company

Occupation

Manager Farm Lines Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		17		2012

Transaction ID : A2BBE6D9A76E84E9F94D

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Ian R. Ward

Mailing Address PO Box 30660

City	State	Zip Code
Lansing	MI	48909-8160

FEC ID number of contributing federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Senior Vice President, Investments and

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		05		2012

Transaction ID : A2E49268B41ED4B8B91C

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

C. Mr. Mark Wenger

Mailing Address PO Box 30660

City	State	Zip Code
Lansing	MI	48909-8160

FEC ID number of contributing federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		05		2012

Transaction ID : AF60A868C89E24D42A56

Amount of Each Receipt this Period

84.00

SUBTOTAL of Receipts This Page (optional)..... ►

139.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. James E. Wilds CPCU, ARM,

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2710.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 07 / 2012

Transaction ID : A8D108083BBFE4AE2993

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Mr. James E. Wilds CPCU, ARM,

Mailing Address One Mutual Avenue

City

Frankenmuth

State

MI

Zip Code

48787-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Frankenmuth Mutual Insurance Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2830.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 21 / 2012

Transaction ID : A68B35655752E4BF1938

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Ms. Denise G. Williams

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Manager-East Michigan Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2012

Transaction ID : A2A276484F2CC4A9A913

Amount of Each Receipt this Period

33.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

273.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 65 OF 75

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. William Woodbury

Mailing Address 6101 Anacapri Blvd

City

Lansing

State

MI

Zip Code

48917-3968

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

SVP, Assoc. Secretary & Assoc. General

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

672.00

Date of Receipt

12 / 05 / 2012

Transaction ID : A558E382FAA0045C7AD0

Amount of Each Receipt this Period

84.00

Full Name (Last, First, Middle Initial)

B. Mr. Jeffrey S. Wrobel SR, CPCU,

Mailing Address PO Box 6927

City

Richmond

State

VA

Zip Code

23230-0927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mutual Assurance Society of Virginia

Occupation

EVP, IT & Underwriting

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

910.00

Date of Receipt

12 / 04 / 2012

Transaction ID : A84AD2399C820440E9D1

Amount of Each Receipt this Period

254.00

Full Name (Last, First, Middle Initial)

C. Mr. Steve Zabriskie

Mailing Address PO Box 30660

City

Lansing

State

MI

Zip Code

48909-8160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auto-Owners Insurance Company

Occupation

Assistant Vice President-Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

264.00

Date of Receipt

12 / 05 / 2012

Transaction ID : AA28083778E5A47D78C8

Amount of Each Receipt this Period

22.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

360.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jerry G. Zenke PFMM

Mailing Address PO Box 708

City

Houston

State

MN

Zip Code

55943-0708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mound Prairie Mutual Insurance Company

Occupation

General Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2521.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2012

Transaction ID : ADB8F3804C7244CCD8E3

Amount of Each Receipt this Period

208.33

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

208.33

8220.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Cc Services Inc Country Political Action Committee

Mailing Address 1701 N Towanda Avenue
PO Box 2020

City State Zip Code
Bloomington IN 61702

FEC ID number of contributing
federal political committee.

C C00390971

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **27** / **2012**

Transaction ID : A65CC8651A8B3478C871

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

5000.00

TOTAL This Period (last page this line number only)..... ►

5000.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

National Association of Mutual Insurance Companies PAC

Category/
Type

11.48

State: District:

Category/
Type

7.95

State: District:

Category/
Type

1.73

State: District:



21.16

The diagram shows a rectangular frame with 10 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

National Association of Mutual Insurance Companies PAC

147.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. LIBERTY PROJECT

Mailing Address PO BOX 30844

City	State	Zip Code
Bethesda	MD	20824-0844

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Other2012

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2012

Transaction ID : BF8D9DA88AC974FDB9F5

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Shelley Moore Capito for Congress

Mailing Address PO Box 11519

City	State	Zip Code
Charleston	WV	25339

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Shelley Moore Capito

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: WV District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2012

Transaction ID : B886BE8030BEC41CB8DC

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. TOGETHER PAC INC

Mailing Address 77 SUMMER ST, 10TH FLOOR

City	State	Zip Code
BOSTON	MA	02108

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Other2012

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2012

Transaction ID : B44C11D1B3EE9426AA28

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

5000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Clark Shultz Campaign Fund

Mailing Address 300 Southwest 10th Avenue, Room 16

City Topeka	State KS	Zip Code 66612-1504
----------------	-------------	------------------------

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2012

Transaction ID : BF87AC15C24C1481BBFE

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Committee to Elect Jason Conger

Mailing Address 900 Court Street Northeast, H-477

City Salem	State OR	Zip Code 97301-4042
---------------	-------------	------------------------

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2012

Transaction ID : B1E6E0BAB3B054965948

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Committee to Elect Matt McCoy

Mailing Address 110 35th Street

City Des Moines	State IA	Zip Code 50312-4509
--------------------	-------------	------------------------

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2012

Transaction ID : BA193922747BD4D57B0C

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Friends of Bill Hansell

Mailing Address 216 Southeast Fourth Street

City	State	Zip Code
Pendleton	OR	97801-2692

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	05	/	2012

Transaction ID : B5F0A90BA0E0D40DDB21

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Friends of Bruce Hanna

Mailing Address 612 Northwest Cecil Avenue

City	State	Zip Code
Roseburg	OR	97470-1953

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	05	/	2012

Transaction ID : BF64CCA166FD34D199F7

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Friends of Dan Lederman

Mailing Address 725 Indian Wells Court

City	State	Zip Code
Dakota Dunes	SD	57049-5123

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	29	/	2012

Transaction ID : BCD98B0A9889043F79C4

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3250.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Friends of Dan Lederman

Mailing Address 725 Indian Wells Court

City	State	Zip Code
Dakota Dunes	SD	57049-5123

Purpose of Disbursement
VOID - Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2012

Transaction ID : BA38CCFF5709541A4AF7

Amount of Each Disbursement this Period

-250.00

Full Name (Last, First, Middle Initial)

B. Friends of Katie Erye

Mailing Address PO Box 3027

City	State	Zip Code
Hillsboro	OR	97123-1935

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2012

Transaction ID : B9D0CF4AAE74B4BEEA49

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. John Carona Campaign Fund

Mailing Address Post Office Box 12068

City	State	Zip Code
Austin	TX	78711-2068

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2012

Transaction ID : B999124793ABE46C09A7

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2250.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. John Davis for Oregon

Mailing Address 10857 Southwest Glenbrook Court

City	State	Zip Code
Wilsonville	OR	97070-6592

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2012

Transaction ID : BE98AE6AE87C94A3AA60

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Matt Wand for East County

Mailing Address 900 Court Street Northeast, H-378

City	State	Zip Code
Salem	OR	97301-4042

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2012

Transaction ID : B1DF5137FDBBD4CF5B51

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Senfronia Thompson Campaign Fund

Mailing Address 8611 Peachtree

City	State	Zip Code
Houston	TX	77016-5811

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2012

Transaction ID : B3E772C642F00436A843

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

A. Tim Knopp for State Senate

Mailing Address P.O. Box 6145

City	State	Zip Code
Bend	OR	97708-6145

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2012

Transaction ID : B18934DB5B9594E70B7B

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

13000.00
